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M E D I C A L O F F I C E R O F H E A L T H

f o r t h e y e a r 1951

B Y

M. I. SILVERTON, T.D., M.R.C.S., L.R.C.P., D.P.H.



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To the Mayor, Alderman and Councillors
of the Rye Borough Council,

I have the honour to present the Annual Report of the Medical
Officer of Health for the year 1951.

The health of the Borough continues to compare favourably
with the rest of England and Wales, the Death Rate being particularly
notable, 11.48 for the Borough of Rye as against 12.5 for the
whole of England and Wales.

It is extremely satisfying to record that there have been no
cases of diphtheria for the past seven years.

The incidence and symptoms of the other infectious diseases
is discussed fully in the general text.

I am grateful to the Chief Sanitary Inspector and the
Additional Sanitary Inspector (Mr. Green) for their willing co-
operation at all times.

The Chief Sanitary Inspector (Mr. Gower) has supplied the
statistical information relevant to the Sanitary circumstances
of the Borough given in this report.

It will be noted that his other official duties include those
of Borough Surveyor and Water Superintendent, and that he has
kindly given me reports on these matters.

I am obliged to the Town Clerk and the Treasurer for their
courtesy and help.

The Housing Committee has given every consideration to my
pleas for rehousing deserving families.

I wish to thank you for your encouragement and support during
the past year.

I have the honour to be,
Mr. Mayor, Ladies and Gentlemen,

M.I.SILVERTON

The Watch Oak,
BATTLE,
Sussex.

Medical Officer of Health.

B O R O U G H O F R Y E

S T A F F

Medical Officer of Health:

M. I. SILVERTON, T.D., M.R.C.S., L.R.C.P., D.P.H.

Chief Sanitary Inspector, Surveyor, Town
Planning Officer and Water Superintendent:

H. C. GOWLER, M.Inst.R.A.

Additional Sanitary Inspectors:

G. W. MAIDLOW, Cert.S.I.B. (1.1.51 to 13.2.51)

R. C. GREEN, M.S.I.A., M.R.San.I. (16.5.51 to 31.12.51)

The staff of the Battle Rural District Council Public
Health Department carry out all the clerical work of
the Medical Officer of Health.

Diphtheria Immunisation
and Vaccination Clerk:

MISS M. H. HEARNshaw

(County Staff employed locally)

Rat Catcher:

MR. W. T. JESSARD

STATISTICS RELATING TO THE BOROUGH OF RYE

	<u>1949</u>	<u>1950</u>	<u>1951</u>
Area of Borough in acres	1,021	1,021	1,021
Population by census 1931	3,947	(Provisional 1951 4,511)	
Population (Registrar General's estimate for mid-year)	4,398	4,506	4,442
Rateable Value	£42,460	£43,102	£44,925
Number of inhabited houses	1,402	1,479	1,515
Number of Rateable premises	1,720	1,758	1,834
Sum represented by a Penny Rate	£164	£167	£171

SECTION I

BIRTHS AND BIRTH RATE

Live Births

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	39	58	97
Illegitimate	<u>5</u>	<u>-</u>	<u>5</u>
	<u>44</u>	<u>58</u>	<u>102</u>

Stillbirths

Legitimate	2	0	2
Illegitimate	<u>0</u>	<u>0</u>	<u>0</u>
	<u>2</u>	<u>0</u>	<u>2</u>

Live Birth Rate per 1,000 of home population 22.96

Corrected Birth Rate 24.79

Live Birth Rate per 1,000 of home population
(England and Wales) 15.5

Stillbirth Rate per 1,000 births (live and still) 19.6

Stillbirth Rate per 1,000 births (live and still)
(England and Wales) 0.36

The Still Birth Rate would appear to be greatly increased having regard to the rest of England and Wales. This, however, is not the case and merely points to the fallacy of converting small numbers into statistical form for comparative purposes, therefore in order to avoid this misapprehension your attention is drawn to the actual number.

The Corrected Birth Rate takes into account the abnormal constitution of the population of this Borough in which there is a predominance of higher age groups and is therefore the appropriate figure when comparison is made with the rest of England and Wales.

DEATHS AND DEATH RATES

<u>Deaths</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
<u>1948</u>	23	33	56
<u>1949</u>	33	33	66
<u>1950</u>	21	38	59
<u>1951</u>	20	31	51

Deaths and Death Rates (continued)

Death Rate for Borough of Rye per 1,000 of home population	11.48
Corrected Death Rate for Borough of Rye	8.83
Death Rate for England and Wales per 1,000 of home population	12.5

It will be noted that the Death Rate compares favourably with England and Wales, and the Corrected Death Rate enhances still further this excellent result.

Deaths under 1 year

Deaths of infants under 1 year in Borough of Rye	One
Infant Death Rate per 1,000 live births	9.8
Infant Death Rate per 1,000 live births (England and Wales)	29.6
Death Rate for diarrhoea (infants under 2 years) per 1,000 live births, Borough of Rye	Nil
Death Rate for diarrhoea (infants under 2 years) per 1,000 live births, England and Wales	1.4

Maternal Deaths

Borough of Rye	Nil
Maternal mortality rate per 1,000 live and still births, Borough of Rye	Nil
Maternal mortality rate per 1,000 live and still births, England and Wales	0.79

Death Rates per 1,000 Home population for certain specific causes

	<u>England and Wales</u>	<u>Rye Borough</u>
Typhoid and paratyphoid	0.00	Nil
Whooping cough	0.01	0.00
Diphtheria	0.00	Nil
Tuberculosis	0.31	0.22
Influenza	0.38	0.00
Smallpox	0.00	Nil
Pneumonia	0.61	0.45
Acute poliomyelitis and polioencephalitis	0.00	Nil

Detailed Causes of Death

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Tuberculosis of respiratory system	0	1	1
Syphilitic disease	0	1	1
Malignant neoplasms, all sites	4	3	7
Loukaemia, aleukaemia	1	0	1
Vascular lesions of the nervous system	1	3	4
Coronary disease, angina	3	4	7
Hypertension with heart disease	1	2	3
Other heart disease	5	10	15
Other circulatory disease	1	2	3
Pneumonia	1	1	2
Other respiratory diseases	0	1	1
Ulcer of stomach and duodenum	1	0	1
Hyperplasia of prostate	1	0	1
Other defined and ill-defined diseases	1	2	3
All other accidents (other than motor vehicle)	0	1	1
	20	31	51

In considering the "Detailed Causes of Death" it is apparent that Malignant Neoplasms (Cancer) has accounted for 7 deaths.

Many, if not all, of these deaths were preventable providing the condition was diagnosed sufficiently early for surgical treatment to be effective. The people should be made aware of the simple early signs and so not delay seeking advice from their doctors, e.g. a lump in the breast, however small or painless, should be an immediate indication for consultation.

Now that the National Health Service Act has given everybody a private doctor service without charge there is no excuse for delay in seeking advice.

Until such time as Medical Research will have discovered the cause and mastered this scourge of mankind, it behoves us all to be on the alert and to prevent by the dissemination of knowledge the inevitable progression to fatality of the untreated or neglected case.

TUBERCULOSIS NOTIFICATIONS

	1946		1947		1948		1949		1950		1951	
<u>PULMONARY</u>	M	F	M	F	M	F	M	F	M	F	M	F
Additions to Register.	3	5	3	3	3	5	0	0	1	4	2	0
Total on Register at 31st December.	11	7	12	10	11	13	7	10	8	14	8	11
<u>NON-PULMONARY</u>												
Additions to Register.	2	2	0	0	0	1	1	1	1	1	0	0
Total on Register at 31st December.	5	3	5	3	4	4	3	4	3	4	3	4

Tuberculosis Notifications (continued)

	<u>Pulmonary</u>	<u>Non-Pulmonary</u>
Death Returns of cases not previously notified	-	-
Transfers from other areas	-	-
Cases restored to Register	-	-
New cases (Primary notifications)	1	-

Tabulated lists (in age groups) of New Cases notified in this Borough and all Deaths during the current year are appended:-

<u>New Cases (Primary Notifications)</u>					<u>All Deaths</u>			
Age	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M	F	M	F	M	F	M	F
0-2	-	-	-	-	-	-	-	-
3-5	-	-	-	-	-	-	-	-
6-10	-	-	-	-	-	-	-	-
11-15	-	-	-	-	-	-	-	-
16-25	-	-	-	-	-	-	-	-
26-45	-	-	-	-	-	-	-	-
46-60	1	-	-	-	-	1	-	-
61 & Over	-	-	-	-	-	-	-	-
Total	1	-	-	-	-	1	-	-

Non-pulmonary tuberculosis.

It is satisfactory to note that there were no notifications of non-pulmonary tuberculosis during the past year. This is a highly satisfactory result and no doubt due to the drinking of pasteurised milk which is retailed throughout the Borough.

This compares very favourably with the surrounding Battle Rural District where undesignated raw milk is still consumed by the younger age groups with consequent notifications of non-pulmonary tuberculosis.

INCIDENCE OF INFECTIOUS DISEASES

Comparative Statistics for the years 1946 - 1951.
1st January - 31st December respectively.

	1946	1947	1948	1949	1950	1951
Scarlet Fever	5	0	4	4	13	10
Measles	2	9	132	30	0	116
Pneumonia	1	0	0	13	3	12
Erysipelas	1	1	1	4	2	3
Whooping cough	6	15	76	0	58	54
Poliomyelitis	0	1	0	0	2	2

Diphtheria

For the past seven years this Borough has been free from diphtheria. Relevant immunisation statistics are given on page 9.

Poliomyelitis

1947, 1949 and 1950 were epidemic years for this disease.

There were two cases in this Borough in 1951, one paralytic and one non-paralytic.

The case of poliomyelitis (paralytic) was left with a fairly severe residual disability involving the right forearm and hand.

Measles.

As foreshadowed in my Annual Report for 1950 there was an increased incidence during the year under review as compared with the previous year.

Abrupt changes in incidence from year to year is typical of this infection, and it is likely that 1952 will show a substantial decrease.

Whooping Cough.

The incidence of this disease was similar to last year. Fortunately there were no fatalities.

The Medical Research Council are conducting field trials with new protective vaccines. Preliminary results are indicative of a large measure of success in preventing this distressing disease.

I am hopeful that a suitable protective inoculation will be generally available in the near future.

Food Poisoning Outbreaks in 1951

Total number of outbreaks	..	Nil
Number of cases	..	Nil
Number of deaths	..	Nil

Other Diseases

The incidence of the other infectious diseases reveal no unusual characteristics.

CASES OF INFECTIOUS DISEASES IN AGE GROUPS

	SCARLET FEVER	MEASLES	PNEU- MONIA	ERYSIP- ELAS	WHOOPING COUGH	POLIOMYE- LITIS	TOTALS
Under year	-	2	2	-	4	-	8
year	-	14	1	-	9	-	24
years	-	8	1	-	12	-	21
years	-	14	1	-	7	-	22
years	1	19	-	-	6	-	26
10 years	5	57	-	-	13	-	75
15 years	2	-	1	-	-	-	3
25 years	2	1	1	-	-	1	5
35 years	-	1	2	1	3	-	7
45 years	-	-	1	-	-	1	2
65 years	-	-	1	1	-	-	2
Over 65	-	-	1	1	-	-	2
TOTALS	10	116	12	3	54	2	197

DIPHTHERIA IMMUNISATION

During 1951 the following children received injections:-

	<u>Treated at Clinics</u>	<u>By Private Doctors</u>	<u>Total</u>
Under 5 years	24	48	72
5 - 14 (inclusive)	13	-	13
			<u>85</u>
Re-inforcing injection	74	6	80

The number of children under 15 years of age, resident in the Borough, who had been immunised by 31st December, 1951.

Under 5 years	285
5 - 14 (inc.)	<u>595</u>
	<u>880</u>

Comparative figures for the past three years.

	<u>1949</u>	<u>1950</u>	<u>1951</u>
No. immunised under 5 years	252	268	285
Child population (under 5)	382	402	420
Percentage immunised	65.96%	66.66%	67.85%
No. immunised 5 - 14 (inclusive)	562	592	595
Child population (5 - 14)	575	609	610
Percentage immunised	97.73%	97.20%	97.54%

There is some satisfaction in noting the increased number of protected children in this District. However, this is no indication for complacency, this disease is still a potential killer which can attack children of all ages once we relax our preventive measures. The rush for protection would then be just as frantic as that exemplified by the raised smallpox vaccination figures given in the succeeding table which are indicative of the proximity of the smallpox outbreak in Brighton in the closing months of 1950 and early 1951.

However, in this connection it should be noted that protection from diphtheria cannot be achieved in the course of a week or two following the requisite injections, but takes months to reach full efficiency, thus differing from vaccination against smallpox.

The minority of parents who have proved so misguided and adamant in refusing immunisation are thus perpetuating a grave risk to their children which could be so easily avoided at no expense to themselves and with negligible discomfort to their offspring.

VACCINATION

Number vaccinated during 1951:-

	<u>Under 1</u>	<u>1</u>	<u>2 - 4</u>	<u>5 - 15</u>	<u>15 or over.</u>	<u>Total</u>
Primary vaccination	46	-	11	27	7	91
Re-vaccination	-	-	2	18	76	96

Comparative figures for the past three years.

	<u>1949</u>	<u>1950</u>	<u>1951</u>
Primary vaccination	33	70	91
Re-vaccination	4	11	96

INVESTIGATION OF AN OUTBREAK OF ILLNESS AT RYE GRAMMAR SCHOOL

On the 21st February, 1951, I was asked by the Medical Officer in charge to investigate an outbreak of illness in a newly opened residential hostel attached to the Rye Grammar School.

The condition of the girls affected gave the impression of some form of food poisoning. This possibility was fully investigated but no article of food could be incriminated. The hygiene of food preparation and storage was of a high order, the purity of the water and milk supplies was proven. The staff was fit and gave no evidence of carrier state. There were no domestic animals, sick or otherwise.

Blood samples were taken and referred to the Public Health Laboratory, Brighton, and ultimately to the Virus Reference Laboratory, the report confirmed that the condition was not a variety of influenza.

A clinical diagnosis of infective hepatitis was made by the Consultant Physician to the Regional Hospital Board but this was not confirmed by the blood tests.

Ultimately 24 out of 26 girls had been affected and four subsequently had their appendices removed. All were fit enough to return home by the end of the term (22nd March, 1951) and there have been no recurrences.

The evidence pointed to the possibility of a filterable air-borne virus with a fairly constant incubation period of 1 - 3 days.

The full detailed history, investigations and conclusions with regard to this outbreak have been accepted for publication by the "Medical Officer" and will appear in that journal dated 8th November, 1952.

CLEAN FOOD

Constant supervision and vigilance is exercised by the Sanitary Inspectors of this Borough in safeguarding the health of the people.

Opportunity is invariably taken to educate food handlers individually in personal hygiene, this is considered to be the cornerstone in the campaign for the prevention of contamination of foodstuffs.

The mere distribution of leaflets is time wasting and of no avail unless these are accompanied by verbal explanation and practical demonstrations wherever possible.

Many stores are cramped and have insufficient and unsuitable storage facilities for their many products. This results in the creation of badly illuminated corners and neglected inaccessible areas which become centres for the accumulation of dirt and filth and suitable breeding places for insects and rodents.

Owners in the main have proved to be co-operative in carrying out suggested measures to obviate these sources of contamination.

Copies of the Clean Food Byelaws have been distributed by hand to managers of food premises in pursuance of the policy that personal contact and discussion of individual problems relating to the observance of the clean food byelaws was the only reasonable and satisfactory method of achieving and expediting this object. Much goodwill and co-operation has been engendered by this mode of approach.

MILK PRODUCTION AND PRODUCERS

The following is a comparative estimate of the percentage of different types of milk produced in the surrounding District:-

			<u>1949</u>	<u>1950</u>	<u>1951</u>
T.T. MILK	..	..	20%	29.3%	35.35%
ACCREDITED MILK	..	..	10%	5.4%	8.72%
UNDESIGNATED	..	..	70%	65.3%	55.93%

The progressive increase in the percentage of T.T. milk is noted with satisfaction.

In my Annual Report of last year I discussed Undulant Fever as an infection which arises from drinking raw milk infected with Brucella organisms.

Throughout the country an average of 15/20% of dairy herds are infected and unless this milk is pasteurised it is likely that it will give rise to infection in susceptible persons.

Many farmers are under a misapprehension in thinking that when their cattle have been injected with S19 that this effectively disposes of the possibility of disseminating disease in this fashion. However, this premise is incorrect insofar as S19 protects the cow only from the harmful effects but does not prevent it from being a carrier of these organisms and disseminating them in the milk as sold to the consumer in its raw state.

Samples of raw milk submitted for bacteriological testing for Tubercle Bacilli have therefore additionally been tested for Brucella organisms. When Brucellae have actually been demonstrated the farmer is directed to send his raw milk for pasteurisation, thus safeguarding and conserving the supply.

The Milk & Dairies Regulations, 1949, provides for this measure when it is considered by the Medical Officer of Health that the milk supply contains substances likely to injure the consumer when taken in its raw state.

Milk Production and Producers (continued)

When desired the farmer is given assistance in locating the particular animals responsible, samples are submitted to the Public Health Laboratory Service for testing without charge. Elimination of carriers of disease from the herd would allow the farmer to revert to his former practice of retailing milk in a raw state.

VITAMIN SUPPLEMENTS

The thirteen-weekly statistical records issued by the Ministry of Food during 1951 with regard to the issue of Cod Liver Oil, Orange Juice and Vitamin Tablets indicate a regrettable lack of understanding and apathy on the part of the mothers with infants of pre-school age.

<u>Orange Juice</u>			<u>Cod Liver Oil</u>		<u>Vitamin Tablets</u>	
	<u>Issue</u>	<u>%</u>	<u>Issue</u>	<u>%</u>	<u>Issue</u>	<u>%</u>
1st	171	71.5	34	50.0	10	58.8
2nd	242	90.0	33	43.4	9	45.0
3rd	179	70.8	37	50.0	10	66.7
4th	159	62.6	40	54.8	7	46.7
Average	187	76.3	36	49.5	9	61.8

The free issue of cod liver oil for all infants from birth to five years was introduced when the special green ration book was issued to infants in this age group.

This supplement was considered necessary in view of the likely deficiency of vitamins A and D in the authorised rations which would have the effect of a general lowering of vitality and thus entail a loss of capacity on the part of the body cells to resist invasion by harmful bacteria. In addition, there would be an added risk of abnormal bone development with ensuing deformities of bones and consequent incapacity in later life accompanied by invalidism of varying degree. In female infants the poor development of the pelvic bones would have the long term effect of making a future confinement a difficult and dangerous procedure with the possibility of death or invalidism to the mother and child.

In recent years Vitamin Tablets have been issued to pregnant women in order to assist the growing child in its earliest formative months, so relieving the mother of the possibility of draining her own system in order to satisfy the essential demands of the coming infant, thus generally conserving her health and energy for the important tasks which lie ahead.

The Vitamin C Supplement contained in orange juice is a very necessary protective factor contributing to maintaining the health of the child and increasing its resistance to infection, and although contained normally in fresh vegetables is soon destroyed by careless cooking, thus the added safeguard of giving orange juice will ensure against loss in the ordinary diet.

Vitamin Supplements (continued) - 13 -

The prevention of disease and the achievement of positive health both present and future is greatly enhanced and assured by the addition of these supplements to the diet of infants, and it is hoped that more mothers will become acutely aware of their obligations to their children and thus ensure that their nutrition and bone formation is not adversely affected by any conscious lapse on their part.

INFANT WELFARE CENTRES IN BOROUGH OF RYE

The Infant Welfare Centre is held on the 2nd and 4th Thursdays in every month at the Youth Club Centre, Lion Street, Rye.

GENERAL OBSERVATIONS ON THE HOUSING ACT, 1936.

Informal notices in connection with routine repairs have in the main been limited to essentials. The application of the higher standard usually understood to be required by the Housing Act, 1936, would have resulted in heavy outgoings by the owners which could not possibly have been recovered from the standard rent in a reasonable time. Technically, the Council are obliged to deal with such cases under Section 11 of the Act, but in practice this would result in the wholesale demolition of buildings thus accentuating the already pressing problems of rehousing.

Many tenants of substandard houses cannot afford the rent of a new Council house, but they could well afford to pay twice the rental of many older properties let at 3/- to 10/- per week, and given the choice would prefer to stay in a repaired and improved cottage at a rent within their means.

This artificial situation is a product of the Rent Restrictions Acts and until these Acts are amended or the burden of maintenance is made reasonable by some form of subsidy (or by a combination of both) the Housing Act of 1936 will continue to prove unreal in its application to present circumstances.

A revision of the Rent Restrictions Acts would accordingly prove helpful to local authorities when dealing with the difficult problems of obsolete and partially worn-out houses.

PROBLEM FAMILIES

The provision of modern amenities as exemplified by the modern council house has been of inestimable value in lightening the burden of housework and raising the living standards of those families who had hitherto been existing in substandard dark houses frequently in a state of gross disrepair. The less careworn housewife has thus been enabled to join in the family group pleasures rather than be the drudge constantly employed on household chores, becoming increasingly tired and bewildered. She can now give that affection and maternal care to the family group which is so essential in the formation of healthy minds and bodies in the young. The inculcation of a sound moral sense of right and wrong is more likely under these favourable circumstances.

The deprivation of a disciplined, happy family life is most certainly the basis of much delinquency and unhappiness occurring in adolescence and adult life.

Problem Families (continued)

The preservation of the well integrated family group is the surest foundation for communal happiness and can become a potent source of strength in overcoming possible depredations by other nations whose way of life is based on different ideologies.

NECESSITY FOR A SMALL EMERGENCY LABOUR WARD
ATTACHED TO THE RYE MEMORIAL HOSPITAL

The provision of a maternity ward at the Rye Memorial Hospital is the prerogative of the Regional Hospital Board.

There is an accumulation of evidence that public feeling is very strong throughout the Borough of Rye and the surrounding parishes in Battle Rural District regarding the extra suffering endured by women in labour having to submit to a journey of 12-15 miles by Ambulance to the Maternity Hospital at Hastings.

When the call arrives at the Ambulance Station, centred in Rye, the potential mother is usually advanced in labour. The driver must then proceed to the address given, which is not always easy to find despite his local knowledge, quite often at night in inclement weather, possibly fog, which may entail a journey over unmade roads and sometimes fields in the more remote areas. This time lag is understandably unavoidable and would be the only adverse factor if the journey finished at the Rye Hospital but the added journey to Hastings could be in the nature of the "last straw".

There would appear to be a potent need for an emergency labour ward or annexe to the Rye Memorial Hospital where there would be facilities for immediate general resuscitation, e.g. blood transfusion, etc.

Admission to the Rye Hospital would be decided by the General Practitioner in attendance or by the Midwife in his absence, if it was considered that the journey to Hastings would be hazardous.

The District Midwife would attend the case as if it had occurred at home, and if considered necessary by the Doctor in charge an Obstetrician could be asked to come out from Hastings to deal with any complications which may have ensued. This would avoid basing permanent extra obstetric staff at the Hospital. Mobile Obstetric Units have been used successfully in other Regions.

In my opinion, a scheme based on these lines would avoid unnecessary suffering, future invalidism and possible loss of life.

NATIONAL ASSISTANCE ACT, 1948

(a) Section 47. Removal to suitable Premises of Persons in Need of care and attention.

Fortunately it was not found necessary to invoke these provisions during the year under review.

An addition to this Section was received in August, 1951, which would appear to be useful in accelerating the procedure in particular cases of urgency.

) Section 50. Burial or Cremation of the Dead.

No action was taken under this Section.

HOME PHYSIOTHERAPY SERVICE

This service is now well into its stride and is a shining example of successful voluntary effort. Many ailing people (young and old) in remote villages have cause to be grateful for the ministrations they have received in their own homes. They have been saved from the frequent prolonged journeyings to and from hospital in variable weather which would otherwise be necessary. Incidentally, the load on the Hospital Car Service must have been somewhat eased.

AMBULANCE SERVICE

The St. John Ambulance Brigade have continued to give this Borough a first-class service.

	<u>1950</u>	<u>1951</u>
Cases	533	546
Mileage	16,142	13,626

PUBLIC HEALTH LABORATORY SERVICE

The facilities available at the Public Health Laboratory, Brighton, have been used extensively, and I am obliged to the Director, (Dr. J.E. Jameson) for his help and co-operation.

PREVENTION OF VENEREAL DISEASES

The Ministry of Health asked for the co-operation of all Local Authorities in giving publicity to the ever present danger of Venereal Diseases. Posters supplied by the Ministry were accordingly displayed at suitable vantage points throughout the Borough. Details regarding Treatment Centres and times of attendance were over-printed.

NATIONAL SOCIETY FOR PREVENTION OF CRUELTY
TO CHILDREN

I would like to thank Inspector Boobyer, the local representative of the N.S.P.C.C., for his timely help in assisting certain families in this Borough who had neglected their duties as parents. These cases have, in the main, been due to (a) force of circumstances (b) weakness of character and intellect (c) ignorance.

By persistent visiting and attempting to inculcate a sense of values he has been instrumental in keeping those families in being and generally rehabilitating them.

SECTION II

The Chief Sanitary Inspector reports:-

INDUSTRIES

The numbers employed in the main industries in the Borough are given below. Working conditions are generally good and the employers have been co-operative.

Below a comparison is made with the previous year.

It will be noted that the numbers employed in ship repairing decreased markedly during the past year.

	1950			1951		
	Male	Female	Total	Male	Female	Total
Aerated Water Manufacturers	3	4	7	5	3	8
Bakeries	16	9	25	19	22	41
Bedding Makers	3	5	8	3	3	6
Builders	91	1	92	79	1	80
Corn Chandlers	17	1	18	19	2	21
Joinery Works	5	-	5	40	1	41
Laundries	10	46	56	12	48	60
Engineering Works	100	11	111	113	11	124
Pottery Works	-	-	-	4	2	6
Printing Works	10	6	16	8	8	16
Sawmills	-	-	-	7	1	8
Ship Repairing	15	1	16	4	-	4
Wastepaper Sorters	3	1	4	8	2	10

Fisheries.

120 vessels are registered at the Port of Rye. Of these 20 berth at Rye or Rye Harbour.

Shipping.

There was no cargo shipping trade at Rye during the year.

Shop-keeping and Catering.

Shop-keeping and catering are two mainstays which contribute greatly to the prosperity of the Town.

PUBLIC HEALTH ACT, 1936.

	<u>Visits</u>	<u>Informal Notices Served</u>	<u>Informal Notices Complied With</u>
Illeged nuisances	120	-	-
Smoke nuisances	8	-	-
Provision of dustbins	4	2	2
Existing drains	50	-	-
New building work	172	-	-
Infectious diseases	18	3 houses disinfected	-
Vermin & insect pests	-	10 houses disinfected	-

HOUSING ACT, 1936.

363 inspections and re-inspections of dwellinghouses were carried out for the following reasons:-

1. Houses controlled by the Borough Council
2. Investigation of complaints by Tenants
3. Application for re-housing on medical grounds, overcrowding, etc.

17 informal and 3 formal notices were served requesting house repairs. All the informal notices and 1 formal notice were complied with and work was put in hand on the remaining two by the end of the year.

It is felt that attention should be drawn to the co-operation of those property owners who, in spite of low rents and high building costs, have carried out works of repair on receipt of an informal notice and in some cases on being approached personally and informally.

MILK & DAIRIES REGULATIONS, 1949.

There is now only one dairy in the Borough and this is used for the receipt and storage of milk obtained already bottled from suppliers outside the Borough. No processing or bottle washing is carried out on the premises. Frequent inspections of these premises have been made and the Directors have been asked to carry out some structural improvements which, it is believed, will be carried out early in the new year.

The following licences were granted during the year:-

Dealer's licence for "Pasteurised" milk	- 2
Dealer's licence for "Tuberculin Tested" milk	- 2

12 samples of milk were taken for examination and submitted to the Public Health Laboratory, Brighton. All passed the prescribed tests.

FOOD AND DRUGS ACT, 1938.

Ice Cream.

Fourteen premises are registered under this Act, thirteen for the storage and sale of ice cream only and one for the manufacture, storage and sale. Two new registrations were made during the year 1951.

Fifteen inspections of ice cream premises were made and advice given on the necessity for sterilising equipment etc.

Eight samples of ice cream were submitted for examination. Six were satisfactory and two were substandard. These two samples were of ice cream which had been manufactured outside the Borough and the attention of the Chief Sanitary Inspector concerned was drawn to the adverse reports. Further samples both here and at the factory proved satisfactory.

INSPECTION OF MEAT AND OTHER FOODS.

There is one slaughter house in the Town which is used solely for slaughtering a small number of pigs in connection with the Self-supplier scheme under Ministry of Food licences. The pork is not for sale and the Council has no duty or control in this connection. The premises, although old, are kept in a satisfactory state of cleanliness.

Inspection of Meat and other Foods (continued)

All animals destined for sale for human consumption are sent to the central slaughterhouse in Hastings and meat inspection is thus limited to visiting butchers' shops. These visits are often made at the request of the butcher who has found some diseased condition when cutting up the meat.

60 inspections of food premises (food shops, catering establishments, etc.,) have been made.

Food inspected and certified as unfit for human consumption during the year:-

	Cwts.	sts.	lb.
Meat - tinned		4	4 $\frac{1}{2}$
Ham - tinned	2	4	2 $\frac{1}{2}$
Fish - wet	1	3	7
Fish - tinned		3	0
Milk - tinned		1	3 $\frac{1}{4}$
Vegetables - tinned		4	3 $\frac{1}{4}$
Fruit - tinned		4	10 $\frac{3}{4}$
Cake			6
Poultry and game		3	9
Faggots		1	4
Miscellaneous cake mixtures, bottled and packeted goods.		2	7
	7	1	1 $\frac{1}{4}$

It will be noted that in common with many other Authorities much trouble was experienced with imported tinned hams. On examination those surrendered voluntarily were found to be in varying stages of decomposition. Some of the hams had been badly bruised before processing whilst others had either been insufficiently processed or improperly canned.

PREVENTION OF DAMAGE BY PESTS ACT, 1949.

The following statistics have been supplied to the Ministry of Agriculture and Fisheries in response to their periodic requests for information.

No. of complaints received regarding infestations by rats and mice	120
No. of properties inspected	261
No. of minor rat infestations	213
No. of mouse infestations	42
No. of minor rat infestations found by survey	130
Treatments carried out by Council operator	255
Estimated kill - rats)	1,102
Estimated kill - mice) Calculated on Ministry formula	478

Rodent Control treatment of sewers was carried out during January and July when visits were made by the Ministry's Inspector and liaison is maintained in order that the best and most up-to-date methods may be used.

FACTORIES AND WORKPLACES.

30 inspections and visits were made to factories and workplaces.

Improvements were asked for at 4 factories and these were

Factories and Workplaces (continued)

carried out. At 3 of these new sanitary accommodation was provided.

There were 50 factories on the register at the end of the year, of these 43 used mechanical power whilst the remaining 7 had no mechanical power.

There are no outworkers under Section 110 (1) (c) in the Borough.

The duties of the Council in connection with the Factories Act, 1938, are mainly concerned with ensuring the provision of suitable and adequate sanitary accommodation.

I am indebted to the Water Superintendent for the following report on:-

WATER SUPPLY.

Routine samples are taken for Bacteriological examination once a month and for chemical examination once a quarter. Other samples are taken as required.

During 1951, 36 Bacteriological samples (24 pre-chlorinated and 12 post-chlorinated) and 8 chemical samples (4 pre-chlorinated and 4 post-chlorinated) were taken. All samples proved satisfactory.

All water supplied to consumers was chlorinated and satisfactory.

The consumption of water during the year was as follows:-

Pumped from Cadborough Waterworks	55,697,000 galls.
Pumped from Military Road	13,967,000 galls.
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	69,664,000 galls.
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This represents an increase of 1,940,000 gallons over the consumption figures for 1950.

The distribution of the water consumed was as follows:-

Borough of Rye	62,469,220 galls.
Hastings C.B. (Rye Harbour)	3,663,000 galls.
Battle (Playden)	3,310,400 galls.
Standpipe	221,380 galls.
	<hr/>
	69,664,000 galls.
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During the year the distribution of water at Rye Harbour which was previously undertaken by Battle R.D.C. was taken over by Hastings C.B. The Council will continue to supply this water until the new Hastings water main is laid to Rye.

The Cadborough boreholes produced an ample supply of water and for 5 months of the year overflowed some few hours after daily pumping ceased.

ADDITIONAL WATER SUPPLY.

This scheme to improve the Town Water Supply consists of an additional borehole with pumping plant, a new pump to the existing bores at Cadborough Waterworks, booster plant to pump

Additional Water Supply (continued)

water from Point Hill reservoir to Rye Hill Water Tower, and also to the Battle R.D.C.'s Tower at Playden and incidental works. The scheme has been approved in principle by the Ministry of Housing and Local Government. Orders were placed for new pumping plant during the year, but owing to the long delivery period no work was commenced.

The Borough Surveyor reports as follows:-

DRAINAGE AND SEWERAGE.

The automatic ejector stations lifted the following amounts of sewage:-

Station A.	Cadborough Marsh	1,636,350 galls.
Station B.	Winchelsea Road	20,649,150 galls.
Station C.	New Winchelsea Road	1,898,875 galls.
Station D.	King's Avenue	2,544,150 galls.
Station E.	Tilling Green	18,104,814 galls.
		<hr/>
		44,833,339 galls.
		<hr/>

This shows an increase of 10,712,419 gallons or 31.7% over the previous year. This is due mainly to the continuation of the development of the Tilling Green Housing Estate.

REFUSE COLLECTION.

685 cubic yards of refuse were disposed of at the controlled tip in Cadborough Road. This completed the reclamation of this land and the tip was closed in February.

Work was then begun in reclaiming a low-lying area in Camber Fields and during the year 2,917 cubic yards of refuse were disposed of at this tip.

In all 3,685 cubic yards of refuse were dealt with during the year.

PRIVATE ENTERPRISE BUILDING.

During 1961, 9 houses were completed by private enterprise.

CONTROL OF CIVIL BUILDING.

During the year 21 licences amounting to £9,437 were issued by the Council and 27 licences amounting to £8,866 were issued by the Ministry of Works for work in the Borough.

The Housing Manager reports as follows:-

HOUSING.

For some years attention has been focussed upon the inability of the low income family man to afford the rent necessitated by high building costs.

Such substantial progress has been made in the Council's

Housing (continued)

post-war housing programme that the pocket of the ratepayer must now receive consideration.

At the 31st December, 1951, accommodation under the control of the Council comprised the following:-

Assisted Schemes - Pre-war houses	115
Assisted Schemes - Post-war houses & flats	187
Expired Leases - Pre-1914 houses	102
Requisitioned houses and flats	16
Temporary hutments	24
	<u>444</u>

This represented 29.8 per cent of the inhabited houses in the Borough.

The Statutory Housing Contribution required to meet the above accommodation amounts to a rate of 8¹/₂d. in the pound. The product of a penny rate would cover subsidies at £5.10.0. each for only 31 dwellings.

The provision of accommodation for present occupants of requisitioned premises and temporary hutments, the need in the near future of much slum clearance work and a waiting list of 269 applicants all emphasize that future rate expenditure on housing presents a considerable problem.

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